

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <i>2,512,246</i>		FILING DATE <i>8</i>			
						APPLICANT(S) <i>1</i>					
CLAIMS											
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
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TOTAL IND.	<i>2</i>	↓		↓		↓			↓		↓
TOTAL DEP.	<i>42</i>	←		←		←			←		←
TOTAL CLAIMS	<i>44</i>										